		SENATE FILE BY DOTZLER
	Pas Vot	ssed Senate, Date Passed House, Date te: Ayes Nays Vote: Ayes Nays
		A BILL FOR
2 3 4	BE TLS	Act relating to the responsibility for the regulation of certain health=related facilities. IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA: SB 2050SS 83 /nh/5
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111111111111111222222222222222222222222	23456789011234156789011222234567890 11234567890 10222234222223333351234567890	Sec. 2. Section 10A.104, Code 2009, is amended by adding the following new subsection:  NEW SUBSECTION. 16. Inspect child foster care facilities and private institutions for the care of dependent, neglected, and delinquent children.  Sec. 3. Section 10A.106, subsection 1, paragraph c, Code 2009, is amended by striking the paragraph.  Sec. 4. Section 10A.106, subsection 2, Code 2009, is amended to read as follows:  2. The allocation of departmental duties to the divisions of the department in sections 10A.402, 10A.702, and 10A.801 does not prohibit the director from reallocating departmental duties within the department.  Sec. 5. Section 96.19, subsection 25, Code 2009, is amended to read as follows:  25. "Hospital" means an institution which has been licensed, certified, or approved by the department of inspections and appeals public health as a hospital.  Sec. 6. Section 135.63, subsection 2, paragraph g, subparagraph (1), subparagraph division (a), Code 2009, is amended to read as follows:  (a) The institutional health facility reports to the department the number and type of beds reduced on a form prescribed by the department at least thirty days before the reduction. In the case of a health care facility, the new bed total must be consistent with the number of licensed beds at the facility. In the case of a hospital, the number of beds must be consistent with bed totals reported to the department of inspections and appeals for purposes of licensure and certification.  Sec. 7. NEW SECTION. 135.90 HEALTH FACILITIES DIVISION.  1. As used in this section, unless the context otherwise requires:  a. "Administrator" means the person coordinating the administration of the health facilities division of the department.  2. The administrator shall coordinate the division of the department.  2. The administrator shall coordinate the division sconduct of various inspections and investigations as otherwise provided by law including but not limited to all of the
2 2 2 2 2 2 2 2	11 12 13 14 15 16 17	a. Investigations relative to the standards and practices of hospitals, hospices, health care facilities, assisted living programs, adult day services, and elder group homes.

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c. Inspections relative to hospital, health care facility, 2 21 assisted living program, adult day services, and elder group 2 22 home construction projects.

Sec. 8. Section 135.107, subsection 1, unnumbered

2 24 paragraph 1, Code 2009, is amended to read as follows: 2 25 The center for rural health and primary care is established 26 within the department. There is established an advisory 2 27 committee to the center for rural health and primary care 28 consisting of one representative, approved by the respective 29 agency, of each of the following agencies: the department of 2 30 agriculture and land stewardship, the Iowa department of 2 31 public health, the department of inspections and appeals, the 32 national institute for rural health policy, the rural health 33 resource center, the institute of agricultural medicine and 34 occupational health, and the Iowa state association of 35 counties. The governor shall appoint two representatives of 1 consumer groups active in rural health issues and a 2 representative of each of two farm organizations active within 3 the state, a representative of an agricultural business in the 4 state, a practicing rural family physician, a practicing rural 5 physician assistant, a practicing rural advanced registered 6 nurse practitioner, and a rural health practitioner who is not 7 a physician, physician assistant, or advanced registered nurse 8 practitioner, as members of the advisory committee. 9 advisory committee shall also include as members two state 3 10 representatives, one appointed by the speaker of the house of 11 representatives and one by the minority leader of the house, 3 12 and two state senators, one appointed by the majority leader 3 13 of the senate and one by the minority leader of the senate.

Sec. 9. Section 135B.1, subsection 1, Code 2009, is 3 15 amended to read as follows:

1. "Department" means the department of inspections and appeals public health.

Sec. 10. Section 135C.1, subsections 2, 4, and 17, Code

3 19 2009, are amended to read as follows:

"Department" means the department of inspections and

appeals <u>public health</u>.
4. "Director" means the director of the department of <del>3 23 inspections and appeals</del> <u>public health</u>, or the director's 3 24 designee.

"Residential care facility" means any institution, 17. 3 26 place, building, or agency providing for a period exceeding 3 27 twenty=four consecutive hours accommodation, board, personal 3 28 assistance and other essential daily living activities to 3 29 three or more individuals, not related to the administrator or 3 30 owner thereof within the third degree of consanguinity, who by 3 31 reason of illness, disease, or physical or mental infirmity 3 32 are unable to sufficiently or properly care for themselves but 33 who do not require the services of a registered or licensed 34 practical nurse except on an emergency basis or who by reason 35 of illness, disease, or physical or mental infirmity are 1 unable to sufficiently or properly care for themselves but who 2 do not require the services of a registered or licensed 3 practical nurse except on an emergency basis if home and 4 community=based services, other than nursing care, as defined 5 by this chapter and departmental rule, are provided. For the 6 purposes of this definition, the home and community=based 7 services to be provided are limited to the type included under 8 the medical assistance program provided pursuant to chapter 249A, are subject to cost limitations established by the 4 10 department of human services under the medical assistance 4 11 program, and except as otherwise provided by the department of 4 12 inspections and appeals public health with the concurrence of 4 13 the department of human services, are limited in capacity to 4 14 the number of licensed residential care facilities and the 4 15 number of licensed residential care facility beds in the state 4 16 as of December 1, 2003.

Section 135C.4, Code 2009, is amended to read as Sec. 11. 4 18 follows:

135C.4 RESIDENTIAL CARE FACILITIES.

4 19 20 Each facility licensed as a residential care facility shall 4 21 provide an organized continuous twenty=four=hour program of 22 care commensurate with the needs of the residents of the home 23 and under the immediate direction of a person approved and 24 certified by the department whose combined training and 4 25 supervised experience is such as to ensure adequate and 26 competent care. All admissions to residential care facilities 27 shall be based on an order written by a physician certifying 4 28 that the individual being admitted does not require nursing 4 29 services or that the individual's need for nursing services

4 30 can be avoided if home and community=based services, other 4 31 than nursing care, as defined by this chapter and departmental 4 32 rule, are provided. For the purposes of this section, the 33 home and community=based services to be provided shall be 34 limited to the type included under the medical assistance 35 program provided pursuant to chapter 249A, shall be subject to 1 cost limitations established by the department of human 2 services under the medical assistance program, and except as 3 otherwise provided by the department of inspections and 4 appeals public health with the concurrence of the department 5 5 of human services, shall be limited in capacity to the number 6 of licensed residential care facilities and the number of licensed residential care facility beds in the state as of 8 December 1, 2003.
9 Sec. 12. Section 135C.19, subsection 3, Code 2009, is 10 amended to read as follows: 5 11 3. If the facility cited subsequently advises the 5 12 department of human services that the violation has been 5 13 corrected to the satisfaction of the department of inspections 14 and appeals public health, the department of human services 5 15 shall maintain this advisory in the same file with the copy of 5 16 the citation. The department of human services shall not 5 17 disseminate to the public any information regarding citations 5 18 issued by the department of inspections and appeals public 5 19 health, but shall forward or refer inquiries to the department 5 20 of inspections and appeals public health. 5 21 Sec. 13. Section 135C.31A, Code 2009, is amended to read 5 22 as follows: 5 23 135C.31A ASSESSMENT OF RESIDENTS == PROGRAM ELIGIBILITY. A health care facility receiving reimbursement through the 25 medical assistance program under chapter 249A shall assist the 26 Iowa department of veterans affairs in identifying, upon 5 27 admission of a resident, the resident's eligibility for 28 benefits through the United States department of veterans 29 affairs. The department of inspections and appeals public 30 health, in cooperation with the department of human services, 31 shall adopt rules to administer this section, including a 5 32 provision that ensures that if a resident is eligible for 5 33 benefits through the United States department of veterans 34 affairs or other third=party payor, the payor of last resort 35 for reimbursement to the health care facility is the medical 1 assistance program. The rules shall also require the health 5 6 2 care facility to request information from a resident or 6 3 resident's personal representative regarding the resident's 6 4 veteran status and to report to the Iowa department of 5 veterans affairs only the names of residents identified as 6 6 6 potential veterans along with the names of their spouses and any dependents. Information reported by the health care 6 8 facility shall be verified by the Iowa department of veterans 6 9 affairs. This section shall not apply to the admission of an 6 10 individual to a state mental health institute for acute 6 11 psychiatric care or to the admission of an individual to the 6 12 Iowa veterans home. 6 13 Sec. 14. Section 135C.33, subsection 6, paragraph a, Code 6 14 2009, is amended to read as follows: 6 15 a. The department of inspections and appeals public 16 health, in conjunction with other departments and agencies of 17 state government involved with criminal history and abuse 6 18 registry information, shall establish a single contact 6 19 repository for facilities and other providers to have 6 20 electronic access to data to perform background checks for 6 21 purposes of employment, as required of the facilities and 6 22 other providers under this section. 6 23 Section 135C.34, Code 2009, is amended to read as Sec. 15. 6 24 follows: 6 25 135C.34 MEDICATION AIDE == CERTIFICATION. The department of inspections and appeals public health, in 27 cooperation with other appropriate agencies, shall establish a 28 procedure to allow a person who is certified as a medication 6 6 6 29 aide in another state to become certified in this state upon 30 completion and passage of both the certified nurse aide and 31 certified medication aide challenge examinations, without 6 32 additional requirements for certification, including but not 6 33 limited to, required employment in this state prior to 34 certification. The department shall adopt rules pursuant to 35 chapter 17A to administer this section. Sec. 16. Section 135J.1, subsection 2, Code 2009, is amended to read as follows:
2. "Department" means the department of inspections and 2

appeals <u>public health</u>.

Sec. 17. Section 135J.2, Code 2009, is amended to read as

6 follows: 135J.2 LICENSES == FEES == CRITERIA. A person or governmental unit, acting severally or 7 9 jointly with any other person may establish, conduct, or 7 10 maintain a hospice program in this state and receive a license 7 11 from the department after meeting the requirements of this 12 chapter. The application shall be on a form prescribed by the 13 department and shall require information the department deems 7 14 necessary. Nothing in this chapter shall prohibit a person or 15 governmental unit from establishing, conducting, or 7 16 maintaining a hospice program without a license. 7 17 application for license shall be accompanied by a 7 18 nonrefundable biennial license fee determined by the 19 department. 7 20 The hospice program shall meet the criteria pursuant to 7 21 section 135J.3 before a license is issued. The department of 22 inspections and appeals is responsible to provide the 7 23 necessary personnel to inspect the hospice program, the home 7 24 care and inpatient care provided and the hospital or facility 7 25 used by the hospice to determine if the hospice complies with 7 26 necessary standards before a license is issued. Hospices that 7 27 are certified as Medicare hospice providers by the department 7 28 of inspections and appeals or are accredited as hospices by 29 the joint commission on the accreditation of health care 30 organizations, shall be licensed without inspection by the 7 31 department of inspections and appeals. 7 32 Sec. 18. Section 135J.4, Code 2009, is amended to read as 7 33 follows: 34 135J.4 INSPECTION. 7 The department of inspections and appeals shall make or be 35 1 responsible for inspections of the hospice program, the home 8 8 care and the inpatient care provided in the hospice program, 8 3 and the hospital or facility before a license is issued. 8 department of inspections and appeals shall inspect the hospice program periodically after initial inspection. 8 5 Sec. 19. Section 142C.16, subsection 1, paragraph j, Code 8 8 7 2009, is amended by striking the paragraph. 8 Sec. 20. Section 155A.13, subsection 4, Code 2009, is 8 9 amended to read as follows: 8 10 4. <u>a.</u> The board shall adopt rules for the issuance of a 8 11 hospital pharmacy license to a hospital which provides 8 12 pharmacy services for its own use. The rules shall: a. (1) Recognize the special needs and circumstances of 8 14 hospital pharmacies. 8 15 b. (2) Give due consideration to the scope of pharmacy 8 16 services that the hospital's medical staff and governing board 8 17 elect to provide for the hospital's own use. 8 <del>c.</del> (3) Consider the size, location, personnel, and 8 19 financial needs of the hospital. 8 20 d. (4) Give recognition to the standards of the joint 8 21 commission on the accreditation of health care organizations 8 22 and the American osteopathic association and to the conditions 8 23 of participation under Medicare. 8 24 To the maximum extent possible, the board shall 8 25 coordinate the rules with the standards and conditions 8 26 described in paragraph  $\frac{\text{"d"}}{\text{"a"}}$ , subparagraph (4) and shall 8 27 coordinate its inspections of hospital pharmacies with the 8 28 Medicare surveys of the department of inspections and appeals 29 public health and with the board's inspections with respect to 8 8 30 controlled substances conducted under contract with the 8 31 federal government. 8 32 c. A hospital which provides pharmacy services by 8 33 contracting with a licensed pharmacy is not required to obtain 8 34 a hospital pharmacy license or a general pharmacy license. 8 Sec. 21. Section 155A.15, subsection 2, paragraph d, Code 2009, is amended to read as follows: 9 d. (1) Delivered without legal authorization prescription drugs or devices to a person other than one of the following: 9 9 (1) (a) A pharmacy licensed by the board. (2) (b) A practitioner.
(3) (c) A person who procures prescription drugs or devices for the purpose of lawful research, teaching, or 9 9 6 9 testing, and not for resale. 8 9 9 (4) (d) A manufacturer or wholesaler licensed by the 9 10 board. However, this chapter does not prohibit a pharmacy 11 (2) 12 from furnishing a prescription drug or device to a licensed 13 health care facility for storage in secured emergency 14 pharmaceutical supplies containers maintained within the 15 facility in accordance with rules of the department of 9 16 inspections and appeals public health and rules of the board.

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9 17 Sec. 22. Section 225C.4, subsection 1, paragraph r, Code 9 18 2009, is amended to read as follows:
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           r. In cooperation with the Iowa department of public
  9 20 health, recommend minimum standards for the maintenance and
  9 21 operation of public or private facilities offering disability
  9 22 services, which are not subject to licensure by the
    23 department, the department of public health, or the department
  9 24 of inspections and appeals.
           Sec. 23. Section 225C.6, subsection 1, paragraph e, Code
  9 26 2009, is amended to read as follows:
           e. Unless another governmental body sets standards for a
  9 28 service available to persons with disabilities, adopt state
  9 29 standards for that service. The commission shall provide that
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    30 a service provider's compliance with standards for a service
    31 set by a nationally recognized body shall be deemed to be in
  9 32 compliance with the state standards adopted by the commission
    33 for that service. The commission shall adopt state standards
    34 for those residential and community=based providers of
  9 35 services to persons with mental illness or developmental
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       disabilities that are not otherwise subject to licensure by
       the department of human services, the department of public health, or department of inspections and appeals, including
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     4 but not limited to remedial services payable under the medical
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     5 assistance program and other services payable from funds
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     6 credited to a county mental health, mental retardation, and
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       developmental disabilities services fund created in section
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       331.424A. In addition, the commission shall review the
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        licensing standards used by the department of human services_
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       the department of public health, or department of inspections
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        and appeals for those facilities providing services to persons
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       with mental illness or developmental disabilities.
Sec. 24. Section 231.58, subsection 1, paragraph d, Code
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        2009, is amended by striking the paragraph.
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           Sec. 25. Section 231B.1, subsection 1, Code 2009, is
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        amended to read as follows:
           1. "Department" means the department of inspections and
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        appeals public health or the department's designee.
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           Sec. 26. Section 231C.2, subsection 3, Code 2009, is
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       amended to read as follows:
           3. "Department" means the department of inspections and
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        appeals <u>public health</u> or the department's designee.
Sec. 27. Section 231D.1, subsection 3, Code 2009, is
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       amended to read as follows:
           3. "Department" means the department of inspections and
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        appeals <u>public health</u>.

Sec. 28. Section 235A.16, subsection 2, paragraph b, Code
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        2009, is amended to read as follows:
          b. The department of inspections and appeals public health
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 10 30 may provide access to the single contact repository
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       established under section 135C.33, subsection 6, for criminal
10 32 and abuse history checks made by those employers, agencies, 10 33 and other persons that are authorized access to child abuse
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       information under section 235A.15 and are required by law to
 10 35 perform such checks.
       Sec. 29. Section 235B.1, subsection 4, paragraph a, subparagraph (1), Code 2009, is amended to read as follows:
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           (1) Advise the director of human services, the director of
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     4 elder affairs, the director of inspections and appeals, the 5 director of public health, the director of the department of
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     6 corrections, and the director of human rights regarding
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       dependent adult abuse.
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           Sec. 30.
                      Section 235B.1, subsection 4, paragraph b
       subparagraph (1), Code 2009, is amended to read as follows:
(1) The advisory council shall consist of twelve members.
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        Six members shall be appointed by and serve at the pleasure of
 11 12 the governor. Four of the members appointed shall be
 11 13 appointed on the basis of knowledge and skill related to
 11 14 expertise in the area of dependent adult abuse including
 11 15 professionals practicing in the disciplines of medicine,
 11 16 public health, mental health, long=term care, social work,
 11 17 law, and law enforcement. Two of the members appointed shall
 11 18 be members of the general public with an interest in the area
 11 19 of dependent adult abuse and two of the members appointed
 11 20 shall be members of the Iowa caregivers association.
 11 21 addition, the membership of the council shall include the 11 22 director or the director's designee of the department of human
 11 23 services, the department of elder affairs, and the Iowa
 11 24 department of public health, and the department of inspections
    25 and appeals.
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           Sec. 31. Section 235B.3, subsection 1, paragraph a, Code
 11 27 2009, is amended to read as follows:
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11 28 The department shall receive dependent adult abuse 11 29 reports and shall collect, maintain, and disseminate the 11 30 reports by establishing a central registry for dependent adult 31 abuse information. The department shall evaluate the reports 11 32 expeditiously. However, the department of inspections and appeals public health is solely responsible for the evaluation 11 34 and disposition of dependent adult abuse cases within 11 35 facilities and programs pursuant to chapter 235E and shall 12 inform the department of human services of such evaluations 12 and dispositions pursuant to section 235E.2. Sec. 32. Section 235B.3, subsection 9, paragraph a, Code 2009, is amended to read as follows: 12 12 12 If, upon completion of the evaluation or upon referral from the department of inspections and appeals public health, the department determines that the best interests of the 12 12 12 8 dependent adult require court action, the department shall 12 initiate action for the appointment of a guardian or 12 10 conservator or for admission or commitment to an appropriate 12 11 institution or facility pursuant to the applicable procedures 12 12 under chapter 125, 222, 229, or 633, or shall pursue other 12 13 remedies provided by law. The appropriate county attorney 12 14 shall assist the department in the preparation of the 12 15 necessary papers to initiate the action and shall appear and 12 16 represent the department at all district court proceedings. 12 17 Sec. 33. Section 235B.3, subsection 13, Code 2009, is 12 18 amended to read as follows: 12 19 13. The department of inspections and appeals public <u>health</u> shall adopt rules which require facilities or programs 12 21 to separate an alleged dependent adult abuser from a victim 12 22 following an allegation of perpetration of abuse and prior to 12 23 the completion of an investigation of the allegation.
12 24 Sec. 34. Section 235B.5, subsection 5, Code 2009, is 12 25 amended to read as follows: 12 26 5. An oral report of suspected dependent adult abuse 12 27 initially made to the central registry regarding a facility or 12 28 program as defined in section 235E.1 shall be transmitted by 12 29 the department to the department of inspections and appeals 12 30 <u>public health</u> on the first working day following the 12 31 submitting of the report. 12 32 Sec. 35. Section 235B.16, subsections 2 and 4, Code 2009, 12 33 are amended to read as follows: 12 34 2. The department, in cooperation with the department of 12 35 elder affairs and the department of inspections and appeals 13 1 public health, shall institute a program of education and 13 training for persons, including members of provider groups and 13 3 family members, who may come in contact with dependent adult 13 4 abuse. The program shall include but is not limited to 13 instruction regarding recognition of dependent adult abuse and 13 the procedure for the reporting of suspected abuse. 6 13 4. The department of inspections and appeals public health 13 8 shall provide training to investigators regarding the 13 9 collection and preservation of evidence in the case of 13 10 suspected dependent adult abuse. 13 11 Sec. 36. Section 235B.16, subsection 5, paragraph d, 13 12 subparagraph (3), Code 2009, is amended to read as follows: 13 13 (3) A training program using such an approved curriculum 13 14 offered by the department of human services, the department of 13 15 elder affairs, the department of inspections and appeals
13 16 public health, the Iowa law enforcement academy, or a similar 13 17 public agency. 13 18 Sec. 37. Section 235E.1, subsection 3, Code 2009, is 13 19 amended to read as follows: 3. "Department" means the department of inspections and 13 20 appeals public health. <del>- 13 - 21</del> 13 22 Sec. 38. Section 235E.2 13 23 amended to read as follows: Section 235E.2, subsection 5, Code 2009, is 13 24 5. Any other person who believes that a dependent adult 13 25 has suffered dependent adult abuse may report the suspected 13 26 dependent adult abuse to the department of inspections and 13 27 appeals public health. The department of inspections and 13 28 appeals <u>public health</u> shall transfer any reports received of 13 29 dependent adult abuse in the community to the department of 13 30 human services. The department of human services shall 13 31 transfer any reports received of dependent adult abuse in 13 32 facilities or programs to the department of inspections and

13 35 2009, is amended to read as follows:
14 1 a. Residential care facilities and intermediate care
14 2 facilities for persons with mental retardation and residential
14 3 care facilities for persons with mental illness licensed by

Sec. 39. Section 423.3, subsection 18, paragraph a, Code

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<del>33 appeals</del> <u>public health</u>.

4 the department of inspections and appeals public health under 14 5 chapter 135C. 14 6 14 7 Sec. 40. Sections 10A.701 and 10A.702, Code 2009, are repealed. 14 8 Sec. 41. DIRECTIVE TO CODE EDITOR. The Code editor shall 14 9 codify section 135.90, as enacted in this Act, as a new 14 10 division of chapter 135, the health facilities division. 14 11 EXPLANATION 14 12 This bill transfers the responsibility for licensing, 14 13 certification, and inspections and related activities for 14 14 hospitals, health care facilities, hospice programs, assisted 14 15 living programs, adult day services, and elder group homes 14 16 from the department of inspections and appeals to the

14 17 department of public health. The bill establishes a health 14 18 facilities division in the department of public health with 14 19 the same duties as were previously assigned to the health 14 20 facilities division of the department of inspections and 14 21 appeals. The bill makes conforming changes throughout the

14 22 Code to reflect this transfer of responsibility.

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